

Risky Business Newsletter



Your source for timely Benefits & Safety related news | Volume 4, Issue 4

"The way to get started is to quit talking and begin doing." - Walt Disney

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Health & Benefits Fair 2019

Thank you, Thank you, Thank you...

To everyone who attended the Health & Benefits Fair on May 15th! We had a great time and gave away some awesome door prizes. The winner of the One Month Free Health Insurance Premium raffle hosted by the Benefits Division was Christi Postma, Accounting Specialist. Congratulations to Christi and all other winners!

Roughly thirty vendors came out and provided information about their services including a few of City of Montgomery's very own departments - Montgomery City/County Public Library, Armory Learning Arts Center, and Montgomery Fire/Rescue. The City of Montgomery has some great departments with some great information and benefits to share and we are especially thankful we were able to come together.

Group Health Plan Premium Increase

Due to the continuing rising costs of healthcare, the City decided to increase the Group Health Plan premiums for the PPO Plan beginning October 1, 2019. (HMP Plan premiums will not change) Bi-weekly rates beginning with the October 11th paycheck are as follows:

Health Plan	Single Coverage	Family Coverage
PPO Plan	\$95.50	\$210.50
PPO Plan (School Patrol)	\$143.25	\$315.75
HMP Plan	\$43.00	\$123.00
HMP Plan (School Patrol)	\$60.71	\$173.65

Premiums include coverage for Medical and Dental (BlueCross BlueShield), Prescription (EHO), Mental Health and Substance Abuse (American Behavioral), access to the CareHere centers, and free medications through the International Drug Program (PreferenceRx).

New Employee Orientation

August 7th
September 4th
October 2nd

City/County
Personnel Department
8:30am

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Important FSA Dates

Combined Mental Health and Substance Abuse Benefits



You may recall during the Open Enrollment presentations we announced that Bradford Health Services is no longer managing the substance abuse benefit and American Behavioral had taken over instead. Employees can still go to the Bradford Health facility to receive treatment but referrals must go through American Behavioral first.

As of the renewal period last month, coverage for substance abuse is now combined under the same benefit levels along with the current mental health benefits. For example, a participant who spends the maximum allowed 30 days inpatient in a hospital facility within 12 months for mental health will not have coverage for additional days needed for substance abuse. See updated benefit grid below.

	In-Network Mental Health	Out-of-Network Mental Health	In-Network Substance Abuse	Out-of-Network Substance Abuse
INPATIENT HOSPITAL SERVICES	Pre-admission Certification is Required for all services. Call 1-800-677-4544.			
<ul style="list-style-type: none">Acute Inpatient HospitalizationAcute Substance DetoxificationInpatient Electroconvulsive Therapy (ECT)Partial Hospitalization/Day Treatment (PHP)Intensive Outpatient Program (IOP) <p>One (1) PHP Day Equals One (1) Inpatient Day One (1) IOP Day Equals One (1) Inpatient Day LIMITATIONS: Up to 30 days combined total mental health and substance abuse each contract year, and up to 60 days combined total mental health and substance abuse per lifetime.</p>	Covered at 100% of allowed amount* after copay Patient Responsibility: <ul style="list-style-type: none">Days 1-3: \$100 per day copayDays 4-19: Full CoverageDays 20-30: \$25 per day copay	Covered at 50% of allowed amount* Patient Responsibility: All billed charges not covered by the Plan	Covered at 100% of allowed amount* after copay Patient Responsibility: <ul style="list-style-type: none">Days 1-3: \$100 per day copayDays 4-19: Full CoverageDays 20-30: \$25 per day copay	NO OUT-OF-NETWORK SUBSTANCE ABUSE BENEFIT
PROFESSIONAL SERVICES				
<ul style="list-style-type: none">Outpatient Office VisitsAmbulatory DetoxificationPsychological/Neuropsychological TestingOne (1) Psychological/Neurological Testing <p>Visit equals One (1) Outpatient office visit - Precertification required for Psychological/Neurological Testing if more than five (5) hours are requested or services are provided by an out-of-network provider. Call 800-677-4544. LIMITATIONS: Up to 30 visits/sessions/group therapy sessions (or any combination thereof) combined total mental health and substance abuse each contract year.</p>	Covered at 100% of allowed amount* after copay Patient Responsibility: <ul style="list-style-type: none">Visits 1-5: \$5 copay per visitVisits 6-20: \$20 copay per visitVisits 21-30: \$35 copay per visit	Covered at 50% of allowed amount* Patient Responsibility: all billed charges not covered by the Plan	Covered at 100% of allowed amount* after copay Patient Responsibility: <ul style="list-style-type: none">Visits 1-5: \$5 copay per visitVisits 6-20: \$20 copay per visitVisits 21-30: \$35 copay per visit	NO OUT-OF-NETWORK SUBSTANCE ABUSE BENEFIT
Inpatient Physician Services in Conjunction with Approved Inpatient Services LIMITATIONS: Up to 30 days combined total mental health and substance abuse each contract year, and up to 60 days combined total mental health and substance abuse per lifetime.	Covered at 100% of allowed amount* Patient Responsibility: None	Covered at 50% of allowed amount* Patient Responsibility: All billed charges not covered by the Plan	Covered at 100% of allowed amount* Patient responsibility: None	
Anesthesia in Conjunction with Approved ECT Treatment	Covered at 80% of allowed amount* subject to the Inpatient Copay amount Patient Responsibility: 20% of allowed amount	Covered at 80% of allowed amount* Patient responsibility: All billed charges not covered by the Plan	Covered at 80% of allowed amount* subject to the Inpatient Copay amount Patient Responsibility: 20% of allowed amount	
BEHAVIORAL HEALTH CARE MANAGEMENT				

Care management is a service offered by the Plan to assist you with difficult behavioral health care needs. You have a personal care manager who acts as your advocate, assisting you whenever you have questions or concerns. Call American Behavioral at 800-677-4544 to talk to your personal care manager.

* **Allowed Amount:** The maximum on which payment for covered health care services is based. The allowed amount can often be considerably less than a provider's actual charge, so when you use an out-of-network provider, you can incur substantial out-of-pocket expenses.

Be On Alert - Fraudulent Telephone Calls

Some employees have contacted us about receiving phone calls from Blue Cross Blue Shield in which the caller is asking about insurance information. These calls are fraudulent and were not authorized by the City of Montgomery or the Blue Cross Blue Shield Association. Read below to find out more about this fraud attempt and how you can protect yourself. This information was provided by Blue Cross Blue Shield and can be found online at www.bcbs.com/healthcare-fraud.

TELEPHONE FRAUD ALERT

Blue Cross Blue Shield has received several complaints of an active fraud scheme in which a caller claims to be associated with “Blue Cross Blue Shield” and uses call spoofing technology to make it appear as if the call is coming from the national “Call Blue” customer-service number (888.630.2583). This number is only used to receive calls from members, not to make calls, and if you receive a call that appears to be from 888.630.2583, the call is fraudulent or malicious and you should not answer it, or hang up immediately after receiving it if you do answer the call initially.

WHAT IS HEALTHCARE FRAUD?

Healthcare fraud is a federal crime under most criminal codes, consisting of intentional deceit for the purpose of illicit gains. Healthcare abuse is similar activity or behavior where knowing intent to obtain an unlawful gain cannot be established. Some examples of healthcare fraud and abuse include:

- Phantom claims for services or supplies that were never provided
- Using someone else’s medical insurance information to obtain services or supplies
- Falsifying signatures or medical records to support misrepresented services or supplies
- Unbundling services from a group to unlawfully increase medical payment
- Misrepresenting the location where services or supplies are provided
- Rendering medical care without a license
- Duplicate claim submissions

HOW TO PROTECT YOURSELF FROM HEALTHCARE FRAUD

Although healthcare fraud is committed by a very small minority within the healthcare system, no one can assume it won’t happen to them. We encourage you to take these steps to avoid becoming a victim of healthcare fraud:

- After care, review your statement to verify accuracy.
- Ask your doctor to explain the reason for services.
- Report any discrepancies to your health insurance plan or payer.
- Beware of “free” medical services, as illicit entities use this lure to obtain information.
- Safeguard your insurance member ID card.
- Report instances where co-payments or deductibles are waived.
- Don’t give your insurance number to marketers or solicitors.
- Never sign a blank insurance form.

If you suspect, experience or witness healthcare fraud, you should report the information to Blue Cross Blue Shield of Alabama by calling the report fraud hotline 1-877-327-2583.

Robocall Scams

Blue Cross Blue Shield Association has received reports that some individuals are receiving robocalls that falsely claim to be made by “Blue Cross Blue Shield”. These calls may seek to market insurance products or collect personal information from call recipients. Neither Blue Cross Blue Shield Association nor any of the Blue Cross and Blue Shield companies licensed to use the Blue Cross and/or Blue Shield brands are making these calls. Licensed Blue Cross and Blue Shield companies will not refer to themselves solely as “Blue Cross,” “Blue Shield” or “Blue Cross Blue Shield” in calls they do make, as each local company must provide information that identifies its corporate or trade name in its communications (for instance, “Blue Cross and Blue Shield of [State]”).

If you get a recorded call from a caller whom you did not authorize to call you, the call is likely fraudulent or malicious and you should hang up immediately. Do not respond to prompts to “press 1 to speak to the operator or get your name taken off the list,” and do not provide any personal information. If you respond, you’ll probably get more calls. It is advisable to block the numbers of the robocalls you receive from calling your cell phone, although these callers may continue to call you from other numbers or use “spoofing” technology that makes the same calls appear to come from different numbers.

July is UV Safety Month

Sunscreen Use Helps Prevent Cancer

AlabamaBlue.com/myBlueWellness

The U.S. Department of Health and Human Services named July as Ultraviolet (UV) Safety Month. The goal is to raise awareness and spread the word about how important it is to protect your skin from the harmful effects of UV rays. Protecting your skin from the sun's damaging UV rays can greatly reduce the risk for developing skin cancer. Sunburns usually begin with slight pinkening of the skin, but can become much more serious later.

Sunscreen Tips

To be sun smart and prevent skin damage from the sun's harmful UV rays, try these tips. Remember, skin can be harmed by UV rays in as few as 15 minutes, even though it may take up to 12 hours for your skin to show the actual symptoms of being burned.

- ◆ **CHOOSE THE RIGHT TIME.** Be sure to seek shade during the heat of the day - from 10am to 4pm.
- ◆ **WHAT TO WEAR.** Remember to wear a hat with a wide brim in order to shade your face, head, ears and neck. Also wear breathable loose-fitting material that covers exposed skin.
- ◆ **CHOOSE SPF 30+.** Always wear a broad spectrum sunscreen of SPF 30 or higher, and be sure to use a sufficient amount, reapplying every two hours.

It's Worth a Shot

CareHere will be offering the flu vaccine for all insured employees and dependents in the 2019 - 2020 flu season.

Watch for flu shot vaccination dates, times and locations this fall.

Check with your CareHere provider before going anywhere else for your flu shot. After vaccination, flu protection is not instant. It takes about 2 weeks for protection to develop. The vaccine is an active protection against influenza for 16 to 20 weeks. The best time to receive the flu shot is October.



- ◆ **ROCK SOME SHADES.** Protect your eyes by wearing sunglasses that block UV rays.
- ◆ **PROTECT YOUR KIDS.** Sunburns during childhood can dramatically increase your chance for developing skin cancer.
- ◆ **PLAN AHEAD.** Apply sunscreen at least 30 minutes before you go out into the sun, not once you are at the beach or pool.

Remember, you can get sunburned anytime of the year - even during the winter - so protect yourself from the sun's harmful rays all year long. For more information about skin cancer, visit the American Cancer Society website, www.cancer.org.



Employees wishing to enroll or make changes to Aflac policies are able to do so during the month of July. Check with your department payroll clerk to see what day Aflac will visit your department. You may also contact Betty Gamache directly at 334-288-3697(office) or 334-462-7600(cell) to enroll or make changes to your policies.

All changes will take effect October 1, 2019.

Free Check in August!

Don't forget there are three paychecks in August - August 2nd, August 16th, and August 30th.

Benefit premiums, including all other payroll deductions, will deduct as normal on August 2nd and August 16th. On August 30th, most benefit premiums will not deduct; hence, some refer to it as a "free check".

Benefit premiums not deducted on August 30th include:

Group Health Plan, Vision, Colonial Life, Liberty National, and Aflac premiums. Wellness Program non-compliance deductions (Health Risk Check-up and Tobacco User) and child support also will not deduct on this check.

All mandatory federal and state taxes, court-ordered garnishments, Flexible Spending Accounts, Deferred Compensation, and United Way will deduct as usual.

COSTCO

Employees who enrolled or renewed their COSTCO Membership had the one-time membership fee deducted on the July 3rd paycheck. COSTCO cards for new memberships should be picked up at COSTCO.

Good to Know:

Personal Advantage

American Behavioral, the City's provider for the Employee Assistance Program (EAP), Mental Health, and Substance Abuse coverage benefits, offers free resources to all full time employees through their



online portal, Personal Advantage. Personal Advantage contains more than 20,000 articles and interactive modules involving work/life topics such as emotional well-being, family life, health, financial, legal, personal growth, and stress. Some popular items on the website include downloadable will kits, financial calculators, parenting articles, and webinars.

Visit www.americanbehavioral.com, click on **Member Login**, and use company name **Montgomery** to register.

Healthcare FSA and Dependent Care FSA Important Dates

If you have a flexible spending account, you have upcoming deadlines for your 2019 funds.

Remember the FSA plan year is from September 1 - August 31 of each year!

The last day to expense current year funds is August 31, 2019.

- You can only use current year funds for claims incurred between September 1, 2018 - August 31, 2019.

The last day to file outstanding claims is September 30, 2019.

- This is your grace period to file claims incurred between September 1, 2018 - August 31, 2019. Claims incurred after August 31, 2019 will go against the new plan year funds.

If you have up to \$500 left in your current year Healthcare FSA, those rollover funds will be applied October 1, 2019.

- There is a one-month waiting period to receive rollover funds giving you adequate time to file your outstanding claims by September 30th.

Dependent Care FSA funds do not rollover. Any funds left in your current year plan will be forfeited on August 31, 2019.

Go to www.allianceinsgroup.com to file a claim or view the status of your accounts.